MISSISSIPPI ASBESTOS DEMOLITION/RENOVATION NOTIFICATION FORM

Mail notification to: MDEQ Asbestos Section, 515 E. Amite Street, Jackson, MS 39201

Operator Project #	Postmark	Date Received (MDEQ use only)	Notification # (MDEQ use only)

I. Type of Notification (O=Original R=Revised C=Canceled A= Annual): O

II. TYPE OF OPERATION (D=Demo O= Ordered Demo R=Renovation E=Emer. Renovation): R

III. FACILITY DESCRIPTION (Include building name, number and floor or room number)

Bldg. Name: WAYNE County High School

Address: 1325 AZALEA Dr.

City: WAYNESboro	State: MS	Zip: 39367
Site Location: 1325 AZALEA Dr., WAYNESboro, MS		Tel: 601-818-5551
Building Size: 15,000 SF	# of Floors: 1	Age in Years: 40 + -
Present Use: VACANT For Summer BREAK	Prior Use: High School LEARNING Building	

IV. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)

OWNER NAME: WAYNE County School District

Address: 810 ChickASAWhay STREET

City: WAYNESboro	State: MS	Zip: 39367
Contact: AARON HOLSTON		Tel: 601-818-5551

REMOVAL CONTRACTOR: Bell ENVIRONMENTAL SERVICES, LLC

Address: P.O. BOX 133

City: DELTA City,	State: MS	Zip: 39061
Contact: Jimmy Bell		Tel: 662-873-4551

OTHER OPERATOR: 810 ChickASAWhay Street

Address: WAYNE County School District (MAINTENANCE DEPARTMENT)

City: WAYNESboro	State: MS	Zip: 39367
Contact: AARON HOLSTON		

V. IS ASBESTOS PRESENT? (Yes/No): YES

VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Include inspector name and date of inspection): PLM, SCIENTIFIC ANALYTICAL LAB., GREENSBORO, NC Albert L. Love Lic.# ABI-0000 13716 Window Caulking (18 windows) (TO BE REMOVED INTACT)

VII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING: 1. Regulated ACM to be Removed 2. Category I ACM Not Removed 3. Category II ACM Not Removed	RACM To Be Removed	Nonfriable Asbestos Material Not To Be Removed		Indicate Unit of Measurement Below	
		Category I	Category II	UNIT	
Pipes				LnFt:	Ln M:
Surface Area Window Replacement	18 windows		REMOVE INTACT	SqFt: 217	Sq M:
Vol RACM Off Facility Component				CuFt:	Cu M:

VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: 5/31/17 Complete: 6/3/17

IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: 5/31/17 Complete: 6/3/17

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:
Wet method, Remove intact, 6 mil Wrap

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION OR RENOVATION SITE: Prep work site, place 6 mil poly to inside wall, tape poly to both sides of windows, Remove intact, wrap, place into contain trailer. await air test.

XII. WASTE TRANSPORTER #1

Name: Bell Environmental Services, LLC

Address: P.O. Box 133

City: Delta City | State: MS | Zip: 39661

Contact Person: Jimmy Bell | Tel: 662 873-4551

WASTE TRANSPORTER #2 N/A

Name:

Address:

City: | State: | Zip:

Contact Person: | Tel:

XIII. WASTE DISPOSAL SITE

Name: Little Dixie Landfill

Address: 1716 County Line Road

City: Ridgeland | State: MS | Zip: 39157

Tel: 601 982-9488

XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW: N/A

Name: | Title:

Authority:

Date of Order (MM/DD/YY): | Date Ordered to Begin (MM/DD/YY):

XV. FOR EMERGENCY RENOVATIONS: N/A

Date and Hour of Emergency (MM/DD/YY):

Description of the sudden unexpected event:

Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:

XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASTESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:

Stop work, Contact owner, Contact MDEQ, Await MDEQ Recommendation

XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR RENOVATION, AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS.

James Gibson — Type or Print Name
James Gibson (Supervisor) — (Signature of Owner/Operator)
5/12/17 — (Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT:

Jimmy Bell — Type or Print Name
Jimmy Bell (Contractor) — (Signature of Owner/Operator)
5/12/17 — (Date)

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Dept. of Environmental Qu